

## WIC – Building Healthy & Strong Families

### 2015 State Plan, Chapter 5, Certification Procedures, 5.2

#### III. SOAP

- A. A SOAP note is a comprehensive note written by the CPA.
  - 1. S – Subjective
    - a. A summary of relevant information the participant tells you.
  - 2. O – Objective
    - a. The measureable data including: height, weight, hemoglobin, mention of scanned prescriptions and/or approvals, and education provided.
    - b. Through discussion with participant, establish a measureable goal the participant will work toward.
  - 3. A – Assessment
    - a. An educated evaluation that includes consideration of both the subjective and objective information.
  - 4. P – Plan\*\*
    - a. The type of follow-up, referrals provided, education and needed anthropometric or hematological measures at the next appointment.
- B. The SOAP note is written to record and organize information in a way that clearly and concisely communicates the participant's situation. It is not acceptable to refer to other areas of the chart in place of documentation in the SOAP note (i.e., "see assessment questions").
- C. M-SPIRIT requires the SOAP to be completed in the Certification Guided Script and Mid-certification Guided Script before benefits are issued, however, if there are additional notes related to the certification or mid-certification which are needed, these will be documented by the close of the following business day.

\*\* See the next page for more details

## WIC – Building Healthy & Strong Families

### 2015 State Plan, Chapter 6, Nutrition Care Plans, 6.2

#### I. Nutrition Care Plan

- A. A formal statement based on the nutrition assessment of nutrition goals and intervention prescribed for a participant.

#### II. Nutrition Care Plan Development

- A. The Competent Professional Authority (CPA) is responsible for developing the nutrition care plan for participants at certification and mid-certification, and following-up on the care plan for high-risk participants if deemed appropriate by the RD.
  - 1. All participants who meet the criteria defined in the High Risk Table will be referred to the RD and documented in the care plan.
  - 2. Care plan should be appropriate for priority level as assigned by risk codes. CPA shall ensure highest priority risk code is assigned and consistent among infant/mother dyads (i.e. 601 and 702).
- B. The Registered Dietitian (RD) is responsible for modifying the nutrition care plan for high-risk participants.
  - 1. The RD may determine a participant can be released for low-risk follow up by the CPA or other qualified staff as a result of their assessment.

#### III. A Nutrition Care Plan Will Include:

- A. The plan for the next appointment including:
  - 1. Frequency of follow-up and types of appointments
  - 2. What needs to be followed up on at the subsequent appointment, such as referrals provided, education given and goals set.
  - 3. Education and measurements needed at subsequent appointments.
- B. Any referrals offered.
  - 1. Declined referrals or instances where no referral was appropriate should also be documented.